

MINUTES OF THE I.A.C. MEETING 15 MARCH 1949

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DIRECTOR: We will take up this question of medical intelligence first, and before we start out - you all have copies of that letter from the Secretary of Defense dated 5 March - this morning we got a telephone call - if you will look in the second paragraph, second line where it says "this recommendation was endorsed by the Secretaries of the Army, Navy, and Air Force" - well, that was approved, except between the word "was" and "endorsed" put "not." That came in this morning. I would like, if it is agreeable, for Dr. Machle of CIA, who talked to Dr. Cooper on this medical intelligence, to tell us something about it.

DR. MACHLE: Well, sir, the agreement with Dr. Cooper ^{and} Out understanding is that the OSD desires certain types of activity on our part, and I understood that this letter was going forward to implement an agreement between him and the Services in respect of the area of our operations. There exists now some misunderstanding as to just what area we will operate in, and I should think it would perhaps be better for me to answer questions with respect to those differences instead of presenting our plan at the outset.

DIRECTOR: All right, the two proposals were made. The one we drew up seems to be generally along the lines of the one that the Secretary of Defense sent down. There is one change in that I want to get at - we should include Public Health on anything we have. They are particularly interested in preventive medicine, epidemics, and treatment and they have done a lot in the meantime and should be included in this organization with the medical officers of the three Services. Any comment? General Irwin? On the whole thing or questions that Dr. Machle can answer.

GEN. IRWIN: Well, we were not entirely clear on the field that would be covered. We are particularly reluctant to abandon in our own medical service the type of intelligence required for operations in theaters and matters of that kind. And within that field the Service Intelligence Agencies would conduct the activities. What is left over is appropriate for this group. But I am frankly a little ignorant of what is left over. In other words, what you would do.

DR. MACHLE: I think we can now make that sufficiently clear. First of all, there is no intent at all, or no opportunity, for the Scientific Branch of CIA to develop operational intelligence for implementation by either the Army, Navy, or Air Force. The intent was first to provide current medical intelligence, and to complete the coverage of basic intelligence on the assumption it would be utilized by all the military agencies for their own intelligence production as directed toward individual operational needs. Our efforts would coordinate and centralize data from many sources of collection of medical intelligence. In order that all the collection needs of the respective military departments would be coordinated into composite requirements, These would then be issued through the appropriate channels for collection. Many forms of what may be called fundamental background or research medical intelligence that deal with technical problems such as the physiological problems common in high altitude flying, schnorkeling submarines and certain others, are common to all services. By having a common repository with three service representatives together there should be a full interchange of ideas. It would be possible for the officers assigned to funnel back to their principal agencies the most recent information, and, we hope, the best information from which to produce their intelligence. I do not visualize the transfer from the individual service intelligence units any medical intelligence facilities now in use. Rather, we intend to strengthen the existing medical intelligence groups and add to their work as a result of the greater flow of information that will become available to them all.

DIRECTOR: Tommy?

ADM. INGLIS: Like so many things, I don't think this has been properly staffed before it reached this Committee. Mr. Forrestal's letter says - I am glad to see he corrected this by putting the "not" in - he also said this has generally been concurred in by the heads of the

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Intelligence Agencies. It has not been concurred in by me. How about you?

GEN. IRWIN: No.

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ADM. INGLIS: As far as I was concerned we were not consulted about this [REDACTED] Report or the conversations between Dr. Machle and Dr. Cooper, not in the drafting of this letter here and I think there were a number of lesser conversations. I would have to make, and I don't think this Committee is the proper Committee to take up all of this spade work, so I would like to say again, suggest again that we form an ad hoc committee of the medical departments to come up with a coordinated recommendation which we can either accept or reject.

DIRECTOR: General Todd?

GEN. TODD: No.

DIRECTOR: General Cabell?

GEN. CABELL: I can't complain about that procedure at all. Although I am ready this afternoon to offer an amendment to your draft, but if the decision is to be to refer it to a Committee, I won't bother this Committee to discuss those amendments.

DIRECTOR: I think we have to discuss amendments. Mr. Forrestal has asked for an answer and wanted it brought to the IAC. We have to give him something.

GEN. CABELL: I can express myself as being generally favorable to the project, but need a little bit more precise definition of the scope of the project and that would be taken care of in the amendments I have to submit.

DIRECTOR: Dr. Colby?

DR. COLBY: I don't think we are involved in this.

MR. ARMSTRONG: I think as General Cabell does that I would be prepared to discuss it this afternoon, but would want to see the proposal somewhat further clarified. Our collection system is already vastly engaged in collecting medical intelligence from all over the world and I would not want the requirements to exceed its capabilities at present.

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DIRECTOR: Well, what amendments have you got that we want to take up when we send it to the ad hoc committee to take up? They have to have something to work on.

GEN. CABELL: I can circulate those papers now if the Committee wants them.

ADM. INGLIS: Mr. Chairman, I think this is a most unusual procedure for the Committee to be instructing the staff. It seems to me the usual principle followed is to have the staff prepare completed staff work for a decision of the Committee instead of having the process reversed.

DIRECTOR: We have to have something for the ad hoc committee to work on.

ADM. INGLIS: They have a letter here from Mr. Forrestal and each one can get instructions, if he so desires, from his parent organization.

GEN. CABELL: Mr. Chairman, I would like to endorse that method of procedure as standard procedure.

DIRECTOR: We will do that. When will you have a meeting?

GEN. CABELL: Any time from this afternoon on as far as I am concerned.

DIRECTOR: We will get one in early next week. Is there anything else we want to take up in the IAC before we go into this closed session on the other item on the agenda?

GEN. IRWIN: All the Directors will be here?

DIRECTOR: Yes.

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